

## Application Data Sheet

### Application Information

Application Type::	Regular
Subject Matter::	Utility
Title::	PATTERN-DEPENDENT EQUALIZATION AND DETECTION
Attorney Docket Number::	<b>S01.12-1013/STL 11469.00</b>
Request for Non-Publication?::	No
Suggested Drawing Figure::	4
Total Drawing Sheets::	<b>6</b>
Small Entity?::	No
Petition included?::	No
Petition Type::	N/A

### Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	China
Given Name::	Xueshi
Family Name::	<b>Yang</b>
Name Suffix::	
City of Residence::	Pittsburgh
State or Province of Residence::	Pennsylvania
Country of Residence::	<b>US</b>
Street of Mailing address::	1922 Teal Trace
City of Mailing address::	Pittsburgh
State of Province of mailing address::	Pennsylvania
Country of mailing address::	US
Postal or Zip Code::	15237

**Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: Turkey  
Given Name:: Erozan  
Family Name:: **Kurtas**  
Name Suffix::  
City of Residence:: Pittsburgh  
State or Province of Residence:: Pennsylvania  
Country of Residence:: **US**  
Street of Mailing address:: 910 Bingham Street, Unit J  
City of Mailing address:: Pittsburgh  
State of Province of mailing address:: Pennsylvania  
Country of mailing address:: US  
Postal or Zip Code:: 15203

**Correspondence Information**

Name:: R. Michael Reed  
Street of mailing address:: Westman, Champlin & Kelly  
900 Second Avenue South, Suite 1600  
City of mailing address:: Minneapolis  
State or Province of mailing address:: MN  
Postal or Zip Code of mailing address:: 55402-3319  
Phone number:: 612/334-3222  
Fax number:: 612/334-3212  
E-Mail address:: **mreed@wck.com**

**Representative Information**

Representative Customer Number::	000027365	
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**Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application			MM/DD/YY

#### **Foreign Priority Information**

Country::	Application number::	Filing Date::	Priority Claimed::
		MM/DD/YY	Yes or No

#### **Assignee Information**

Assignee name:: Seagate Technology LLC  
 Street of mailing address:: 920 Disc Drive  
 City of mailing address:: Scotts Valley  
 State or Province of mailing address:: CA  
 Postal or Zip Code of mailing address:: 95066